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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Substitute for form 1449B/PTO Complete if Known INFORMATION DISCLOSURE **Application Number** 10/584,249 STATEMENT BY APPLICANT Filing Date 4/27/2006 **First Named Inventor** Tomoyoshi ISHIKAWA Date Submitted: February 3, 2009 Group Art Unit 1644 Examiner Name (use as many sheets as necessary) 1542 Sheet 1 Attorney Docket Number 081356-0261

U.S. PATENT DOCUMENTS									
Examiner Initials*	Cite No.1	U.S. Patent Document		Name of Patentee or Applicant of Cited	Date of Publication of	Pages, Columns, Lines, Where			
		Number	Kind Code ² (if known)	Document Document	Cited Document MM-DD-YYYY	Relevant Passages or Relevant			
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	B2	5 908 826		Mitsui Toatsu Chemicals Inc.	6/1/1999				
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Examiner Initials*	Cite No.1	Office ³	Foreign Patent Document Number ⁴ Kind Code ⁵ (<i>if known</i>)	Name of Patentee or Applicant of Cited Documents	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	Te
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Examiner	Date	
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^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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